

AIR POLLUTANT EMISSION NOTICE (APEN) & Application for Construction Permit – Midstream Condensate Tank Battery

Permit Number: _____ [Leave blank unless APCD has already assigned a permit # & AIRS ID] **Emission Source AIRS ID:** _____ / _____ / _____
Facility Equipment ID: _____ [Provide Facility Equipment ID to identify how this equipment is referenced within your organization.]

Section 01 – Administrative Information

Company Name: _____ NAICS, or
Source Name: _____ SIC Code: _____
Source Location: _____ County: _____
Elevation: _____ Feet
Mailing Address: _____ ZIP Code: _____
Person To Contact: _____ Phone Number: _____
E-mail Address: _____ Fax Number: _____

Section 03 – General Information

For existing sources, operation began on: _____ / _____ / _____ For new or reconstructed sources, the projected startup date is: _____ / _____ / _____
Normal Hours of Source Operation: _____ hours/day _____ days/week _____ weeks/year

General description of equipment and purpose: _____

- ▶ Do any of the condensate storage tanks have a capacity $\geq 10,000$ bbl? ☐ Yes ^A ☐ No
▶ Are you requesting ≥ 20 ton/yr VOC emissions, or are uncontrolled actual emissions ≥ 20 ton/yr? (If “Yes”, Regulation No. 7, Section XVII.C will apply) ☐ Yes ☐ No
▶ Is this unit located at a stationary source that is considered a Major Source of Hazardous Air Pollutant (HAP) emissions? ☐ Yes ☐ No ☐ Don’t know
▶ Will this equipment be operated in any NAAQS nonattainment area? (<http://www.cdphe.state.co.us/ap/attainmaintain.html>) ☐ Yes ^B ☐ No ☐ Don’t know

^A If “Yes”, the tank(s) may be subject to Regulation No. 7, Sections III, IV, & VI, and Regulation No. 6, Part A, Subpart Kb or Ka. Provide an applicability determination of these rules.

^B If “Yes”, the tank(s) may be subject to Regulation No. 7, Section XII.A or XII.B. Provide an applicability determination of these rules.

Section 04 – Tank Battery Information¹

Number of tanks: _____ Total tank capacity (bbl): _____
Condensate throughput: Requested²: _____ bbl/year Actual calendar year: _____ bbl/year
Is actual annual average hydrocarbon liquid throughput ≥ 500 bbl/day? ☐ Yes ☐ No
• If “yes” above, identify the gas-to-oil ratio: _____ m³/liter
Are “flash”³ emissions anticipated from the tank(s)? ☐ Yes ☐ No
API gravity: _____ degrees
Reid Vapor Pressure: _____ psi True Vapor Pressure: _____ psia @ 60 °F

¹ See PS Memo 05-01 for information on condensate tank permitting and identification of parameters used to calculate emissions.

(<http://www.cdphe.state.co.us/ap/down/ps05-01.pdf>)

² Requested values will become permit limitations.

³ Hydrocarbons can “flash” into the vapor phase due to a reduction in pressure on the hydrocarbon liquids.

Additional Information Required:	<input type="checkbox"/> Attach a pressurized pre-flash condensate extended gas analysis, RVP & API analysis of the post-flash oil
	<input type="checkbox"/> Attach E&P Tanks input & emission estimate documentation (or equivalent simulation report/test results)
	<input type="checkbox"/> Attach EPA TANKS emission analysis if emission estimates do not contain working/breathing losses

Section 02 – Requested Action (Check applicable request boxes)

- ☐ Request for NEW individual permit or newly reported emission source
☐ Request MODIFICATION to existing permit (check each box below that applies)
☐ Change process or equipment ☐ Change company name
☐ Change permit limit ☐ Transfer of ownership ☐ Other
☐ Request for coverage under GENERAL PERMIT number GP01
☐ Request APEN update only (check the box below that applies)
☐ Revision to actual calendar year emissions for emission inventory
☐ Update 5-Year APEN term without change to permit limits or previously reported emissions

Addl. Info. & Notes: _____

Colorado Department of Public Health and Environment **Air Pollution Control Division (APCD)**

This notice is valid for five (5) years. Submit a revised APEN prior to expiration of five-year term, or when a significant change is made (increase production, new equipment, change in fuel type, etc).

Mail this form along with a check for \$152.90 per APEN and \$250 for each general permit registration to:

Colorado Department of Public Health & Environment
APCD-SS-B1
4300 Cherry Creek Drive South
Denver, CO 80246-1530

For guidance on how to complete this APEN form:

Air Pollution Control Division: (303) 692-3150
Small Business Assistance Program (SBAP): (303) 692-3148 or (303) 692-3175

APEN forms: <http://www.cdphe.state.co.us/ap/downloadforms.html>

- ☐ Check box to request copy of draft permit prior to issuance.
☐ Check box to request copy of draft permit prior to public notice.

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Section 05 – Stack Information (Combustion stacks must be listed here)

Operator Stack ID No.	Stack Base Elevation (feet)	Stack Discharge Height Above Ground Level (feet)	Temp. (°F)	Flow Rate (ACFM)	Velocity (ft/sec)	Moisture (%)

Direction of stack outlet (**check one**): ☐ Vertical ☐ Vertical with obstructing raincap

Exhaust Opening Shape & Size (**check one**): ☐ Circular: Inner Diameter (inches) = _____

Section 06 – Stack (Source, if no combustion) Location (Datum & either Lat/Long or UTM)

Horizontal Datum (NAD27, NAD83, WGS84)	UTM Zone (12 or 13)	UTM Easting or Longitude (meters or degrees)	UTM Northing or Latitude (meters or degrees)	Method of Collection for Location Data (e.g. map, GPS, GoogleEarth)

☐ Horizontal ☐ Down ☐ Other (Describe): _____

☐ Other: Length (inches) = _____ Width (inches) = _____

Section 07 – Control Device Information

<input type="checkbox"/> Condenser used for control of the tank battery. Type: _____ Make/Model: _____ Temperature (°F): Maximum: _____ Average: _____ Requested VOC & HAP Control Efficiency: _____ %	<input type="checkbox"/> Combustion Device used for control of the tank battery. Rating: _____ MMBtu/hr Type: _____ Make/Model/Serial #: _____ VOC & HAP Control Efficiency: Requested: _____ % Manufacturer Guaranteed: _____ % Minimum temp. to achieve requested control: _____ °F Waste gas heat content: _____ Btu/scf Constant pilot light? <input type="checkbox"/> Yes <input type="checkbox"/> No Pilot burner rating: _____ MMBtu/hr
<input type="checkbox"/> VRU used for control of the tank battery. Size: _____ Make/Model: _____ Requested VOC & HAP Control Efficiency: _____ % Annual time that VRU is bypassed (emissions vented): _____ %	<input type="checkbox"/> Closed loop system used for control of the tank battery. Description: _____ <input type="checkbox"/> Describe Any Other : _____

Section 08 – Emissions Inventory Information & Emission Control Information

☐ Emission Factor Documentation attached Data year for actual calendar yr. emissions below & throughput in Sec. 04 (e.g. 2007): _____

Pollutant	Control Device Description		Control Efficiency (% Reduction)	Emission Factor		Actual Calendar Year Emissions ⁴		Requested Permitted Emissions ⁵		Estimation Method or Emission Factor Source
	Primary	Secondary		Uncontrolled Basis	Units	Uncontrolled (Tons/Year)	Controlled (Tons/Year)	Uncontrolled (Tons/Year)	Controlled (Tons/Year)	
NO _x	Identify in Section 07									
VOC										
CO										
Benzene										
Toluene										
Ethylbenzene										
Xylene										
n-Hexane										

Please use the APCD Non-Criteria Reportable Air Pollutant Addendum form to report pollutants not listed above.

⁴ Annual emission fees will be based on actual emissions reported here. If left blank, annual emission fees will be based on requested emissions.

⁵ If Requested Permitted Emissions is left blank, the APCD will calculate emissions based on the information supplied in sections 03 - 08.

Section 09 – Applicant Certification - I hereby certify that all information contained herein and information submitted with this application is complete, true and correct. If this is a registration for coverage under general permit GP01, I further certify that this source is and will be operated in full compliance with each condition of general permit GP01.

Signature of Person Legally Authorized to Supply Data

Date

Name of Legally Authorized Person (Please print)

Title